WATER WELL RECORD FORM WWC-5						ion of Wate			W. II II			
Original Record Correction Change			ge in Well Use	Resources App. No.				Well ID	., .			
1 LOCATION OF WATER WELL:			Fraction	Section Number			Township Numbe		ge Number			
County: Ellsworth			14 NW 14 NE 1			11		T 15 S		□E ■ W		
		Last Name: Macek	First: Melvin	Street or Rural Address where well is located (if unknown, distance and								
Business				direction	direction from nearest town or intersection): If at owner's address, check					heck here:		
Address	000 0	Road		2\M Bla	المسالة	f KC						
Address:		2	77D 07.400	2W Blackwolf, KS								
City:	Wilson	State: KS	ZIP: 67490			Γ						
3 LOCAT		4 DEPTH OF COM	APLETED WELL:	65 ft. 5 Latitude:(decimal d					desimal degrees)			
WITH "				Encountered: 1) ft.			Longitude:(decimal degrees)					
	ON BOX:	2) ff	3) ft., or 4)		-11	Long	nua	e:	(decimal degrees)		
N WELL'S STATIC V			TER LEVEL:	4 ., n	-11			Datum: WGS 84	□ NAD 8	3 □ NAD 27		
		■ below land surface	, measured on (mo-day	-vr) 11/2	4/15	Source	e ior	Latitude/Longitude:		,		
NW	NE											
NW	NE	Pump test data: Well v				□ Land Survey □ Topographic Map						
			rs pumpinggpm			☐ Colline Mapper:						
1 1 '		Welly	Well water was ft.			Onnie wapper						
SW	SE		after hours pumping gpm									
	1 1 1	Estimated Yield:4.		. Ph		6 Elevation:ft. ☐ Ground Level ☐ TOC						
	S		Bore Hole Diameter: in. to			nd Source: ☐ Land Survey ☐ GPS ☐ '			PS 🔲 To	pographic Map		
							Other					
mile in. to ft.												
1. Domestic			ater Supply: well ID			10 🗆 0	il Fie	ld Water Supply: lea	CO			
☐ House			ng: how many wells?									
	& Garden	echarge: well ID			11. Test Hole: well ID							
Livest				-				12. Geothermal: how many bores?				
	2. Irrigation 9. Environmental Remediation: well ID											
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex											
4. Indust		Lauaction						ing. or water				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
Water well disinfected? ■ Yes □ No												
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other												
Casing diameter												
Casing diameter 5 in to 65 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Weight above land surface 12 in Weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped ■ Saw Cut □ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From .25												
GRAVEL PACK INTERVALS: From												
OCCOUNT MATERIAL. CONSTRUCTION OF CONSTRUCTION												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From 0 ft. to 23 ft., From ft. to ft., From ft. to ft.												
Nearest source of possible contamination: Septic Tank												
☐ Sewer		☐ Cess Pool				vestock Pe iel Storage			_	:7 H		
			☐ Sewage La ☐ Feedyard	igoon				☐ Abandon		/en		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well ■ Other (Specify) .nonein pasture												
Direction from well?												
10 FROM	TO	LITHOLOG		FRO				HO. LOG (cont.) or P	LUCCNIC	INTEDMALO		
			JIC LUG	1 rkur	VI -	-10	LII	ino. Log (cont.) or P	LUGGING	INTERVALS		
0		top soil										
2	· · · · · · · · · · · · · · · · · · ·	clay			_							
7		sand and gravel			\bot							
15		shale										
27		sand rock										
60	65	shale										
				Notes	:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
Lunder my it	urisdiction a	nd was completed on (m	no-day-year) 1.1/24/	15 :	and thi	is record i	s trii	e to the best of my	knowledge	e and helief		
Kansas Wa	ter Well Co	ntractor's License No 1	86 This W	ater Well	Recor	d was con	nnlei	ted on (mo-day-yea	r) 11/25/	15		
under the h	usiness nam	ntractor's License No1 e of Kellv's Water We	Il Service. Inc.		Sign:	ature		Land on (mo-day-yea	Q Son	<i>A</i>		
Mail	white copy ale	ong with a fee of \$5.00 for eac	h constructed well to: Kar	nsas Denarti	nent of	Health and 1	Envir	onment. Bureau of Wate	er GWTS Se	ection		
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.												
		s.gov/waterwell/index.html		KSA 82			01	, an issuite. Telephot		7/10/2015		
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